## PART B - FEE(S) TRANSMITTAL

OCT 2 0 2006  NSTRUCTIONS: THE applicate. All function indicates will applicate maintenance the notification in the control of	form should be used correspondence includited below or directed of ations.	for ng her	UNITED STATES POSTAL SERVICE	or <u>Fax</u>	Correspondent	mmissioner for . Box 1450 xandria, Virgi 1)-273-2885 ON FEE (if requiaintenance fees woondence address;	red). Blocks I thill be mailed to the and/or (b) indicate mailing can only.	rough 5 sh he current c ing a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for domestic mailings of the
10/23/2005 CCKAU2 01 FC:2501	N LANE I BEACH, CA 9264 00000058 10775589	3721 00 00 0P	WESTMINSTER: CA 92685 OCT 1275 AMDUNT	007 2006 2007	paper have	rs. Each additional its own certificate  Cert eby certify that this is Postal Service will seed to the Mail mitted to the USPT	paper, such as an of mailing or trans ificate of Mailing s Fee(s) Transmitt ith sufficient posts from 155 Her February 1	assignment or Transmal is being age for first	r any other accompanying t or formal drawing, must nission deposited with the United class mail in an envelope
02 FC:1504	)0		(W. ED)	10/17/06				(Date)	
APPLICATION NO.	FILING DATE			FIRST NAMED INVEN	TOR		ATTORNEY DOCK	ET NO.	CONFIRMATION NO.
10/775,589 02/09/2004 Tosh Ono ONO.T-01 1738 TITLE OF INVENTION: GLOVE ADAPTED FOR USE IN FIREARMS LOADING, SHOOTING AND UNLOADING									
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	FEE TOTAL FE	E(S) DUE	DATE DUE
nonprovisional	YES	\$	700	\$300		\$0	\$10	000	10/30/2006
EXAM	INER	ART	TUNIT	CLASS-SUBCLASS					
HANEY, RICHALE LEE		3	765	002-161100	002-161100				•
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Floase check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									
,				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. (#2001)  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
	SMALL ENTITY statu	s. See 37 CI		☐ b. Applicant is no	longe	r claiming SMALL	ENTITY status.	Sec 37 CFR	1.27(g)(2).
NOTE: The Issue Fee and interest as shown by the r	ecords of the United Stat	es Patent an	d Trademark	Office.	an the	applicant; a registe	ered attorney or ag	ent; or the a	assignee or other party in
Authorized Signature	·		Date 10	117/0	16	<u> </u>			
Typed or printed name TOSH B. ONO								., .,	
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231 Under the Paperwork Red	application form to the ons for reducing this burd rginia 22313-1450. DO 3-1450.	USPTO. Ti len, should NOT SENI	me will vary of be sent to the D FEES OR C	depending upon the in Chief Information Off OMPLETED FORMS	dividi ficer, TO T	ual case. Any comi U.S. Patent and Tri THIS ADDRESS. S	ments to complete, ments on the amorademark Office, U SEND TO: Comm	including gunt of time J.S. Departrissioner for	yathering, preparing, and you require to complete nent of Commerce, P.O. Patents, P.O. Box 1450,